

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Connolly for Congress

ADDRESS (number and street)

3706 Prado Place

☐Check if different
than previously
reported. (ACC)

Fairfax

VA

22031

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00445452

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

VA

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

11

23

2010

through

12

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Jennison

Signature of Treasurer

Electronically Filed by John Jennison

Date

07

15

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Connolly for Congress

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	3800.40	5313.53
(b) Total Contribution Refunds (from Line 20(d)).....	9000.00	9000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-5199.60	-3686.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	22030.32	113902.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	82.66
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	22030.32	113819.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	22604.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name
Connolly for Congress

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

300.00

1050.00

(ii) Unitemized.....

500.40

903.53

(iii) TOTAL of contributions
from individuals..... ▶

800.40

1953.53

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

3000.00

3360.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

3800.40

5313.53

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

82.66

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

211.07

211.07

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

4011.47

5607.26

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	22030.32	113902.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	30000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	9000.00	9000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	9000.00	9000.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31030.32	152902.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	49623.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	4011.47
25. SUBTOTAL (add Line 23 and Line 24).....	53635.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31030.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22604.74

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Connolly for Congress

A.

Full Name (Last, First, Middle Initial)

Margaret Roth

Mailing Address 1505 Kenyon Dr

City

Naperville

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 1 0

Transaction ID: C6472000

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 24

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Connolly for Congress

A.

Full Name (Last, First, Middle Initial)

ACS

Mailing Address 2828 N. Haskell Avenue

City

Dallas

State

TX

Zip Code

75204

FEC ID number of contributing
federal political committee.**C**

C00248245

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	1	0

Transaction ID: C6496137

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MANTECH

Mailing Address 12015 Lee Jackson Highway
Suite 841

City

Fairfax

State

VA

Zip Code

22033

FEC ID number of contributing
federal political committee.**C**

C00208983

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	1	0

Transaction ID: C6496138

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

DELOITTE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 365

City

Washington

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.**C**

C00211318

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	1	0

Transaction ID: C6496139

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
<input checked="" type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Connolly for Congress

A.Full Name (Last, First, Middle Initial)
BB&T

Mailing Address 1717 King St

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

 Receipt For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: C6658454

Amount of Each Receipt this Period

16.54

B.Full Name (Last, First, Middle Initial)
BB&T

Mailing Address 1717 King St

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

 Receipt For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	1	0

Transaction ID: C6658475

Amount of Each Receipt this Period

24.53

C.Full Name (Last, First, Middle Initial)
BB&T

Mailing Address 1717 King St

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

 Receipt For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	1	0

Transaction ID: C6658496

Amount of Each Receipt this Period

170.00

SUBTOTAL of Receipts This Page (optional)

211.07

TOTAL This Period (last page this line number only)

211.07

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Signapay</p> <p>Mailing Address 105 Decker Ct Suite 650</p> <p>City Irving State TX Zip Code 75062</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358719</p> <p>Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>401.30</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Signapay</p> <p>Mailing Address 105 Decker Ct Suite 650</p> <p>City Irving State TX Zip Code 75062</p> <p>Purpose of Disbursement Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358720</p> <p>Date of Disbursement <div> <div>12</div> <div>13</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>19.95</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 South 500 East Suite 200</p> <p>City American Fork State UT Zip Code 84003</p> <p>Purpose of Disbursement Merchant Gateway Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358718</p> <p>Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>41.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

462.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) LEAGUE OF CONSERVATION VOTERS ACTION FUND	Transaction ID: D353178 Date of Disbursement
Mailing Address 1920 L Street, NW, Suite 800	<div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> <div>11</div> / <div>30</div> / <div>2010</div> </div>
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Fees	<div>0.02</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Donald Brownlee	Transaction ID: D358721 Date of Disbursement
Mailing Address 2630 S. Veitch St #309	<div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> <div>12</div> / <div>02</div> / <div>2010</div> </div>
City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1869.31</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Donald Brownlee	Transaction ID: D358722 Date of Disbursement
Mailing Address 2630 S. Veitch St #309	<div> <div><div>M</div><div>M</div></div> / <div><div>D</div><div>D</div></div> / <div><div>Y</div><div>Y</div><div>Y</div><div>Y</div></div> <div>12</div> / <div>20</div> / <div>2010</div> </div>
City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1869.31</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3738.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Grant Herring	Transaction ID: D358723 Date of Disbursement
Mailing Address 4305 Ramona Dr Apt D	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Fairfax VA 22030-4248	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1210.14</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Swift CPA	Transaction ID: D358744 Date of Disbursement
Mailing Address 201 King St Ste 200	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 3 / 2 0 1 0</div> </div>
City State Zip Code Alexandria VA 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Software License Fee	<div>50.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Amphora Catering	Transaction ID: D358755 Date of Disbursement
Mailing Address 1141 Elden St., Suite 224	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 1 0</div> </div>
City State Zip Code Herndon VA 20171	Amount of Each Disbursement this Period
Purpose of Disbursement Event Catering Services	<div>2297.77</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3557.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 4009	Transaction ID: D358717 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2010</div> </div>
City Silver Spring State MD Zip Code 20914 Purpose of Disbursement Mobile Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>845.47</div>
B. Full Name (Last, First, Middle Initial) Political CFOs, Inc Mailing Address 201 King St Suite 200 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Compliance Consulting Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D358732 Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>3000.00</div>
C. Full Name (Last, First, Middle Initial) US Postal Service Mailing Address 1100 Wythe St City Alexandria State VA Zip Code 22314 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D358740 Date of Disbursement <div> <div>12</div> <div>20</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>300.00</div>

SUBTOTAL of Disbursements This Page (optional)

4145.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 24

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 1100 Wythe St</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358742</p> <p>Date of Disbursement <div> <div>12</div> <div>20</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>582.14</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 1100 Wythe St</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement PO Box Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358743</p> <p>Date of Disbursement <div> <div>12</div> <div>31</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>55.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) D&P Printing and Supplies</p> <p>Mailing Address 5631-I General Washington</p> <p>City Alexandria State VA Zip Code 22312</p> <p>Purpose of Disbursement Printing/Envelopes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358729</p> <p>Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>375.90</div> </p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <div>1013.04</div></p>	
<p>TOTAL This Period (last page this line number only) ► <div></div></p>	

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) BB&T	Transaction ID: D358747 Date of Disbursement
Mailing Address 1717 King St	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 2 1 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Charges	<div>76.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BB&T	Transaction ID: D358817 Date of Disbursement
Mailing Address 1717 King St	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 1 / 2 3 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Charges	<div>339.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BB&T	Transaction ID: D358818 Date of Disbursement
Mailing Address 1717 King St	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 1 / 2 3 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Charges	<div>255.00</div>
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

670.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Connolly for Congress

A.

Full Name (Last, First, Middle Initial)
Jermantown Square LP

Mailing Address 9302 Lee Hwy
Suite 300

City State Zip Code
Fairfax VA 22031

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 911 Panorama Trail South

City State Zip Code
Rochester NY 14625

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 911 Panorama Trail South

City State Zip Code
Rochester NY 14625

Purpose of Disbursement
Workman's Compensation Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358735

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Connolly for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 911 Panorama Trail South</p> <p>City Rochester State NY Zip Code 14625</p> <p>Purpose of Disbursement Payroll Service Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358736</p> <p>Date of Disbursement <div> <div>12</div> <div>10</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>190.24</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 911 Panorama Trail South</p> <p>City Rochester State NY Zip Code 14625</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358737</p> <p>Date of Disbursement <div> <div>12</div> <div>20</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>913.25</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 911 Panorama Trail South</p> <p>City Rochester State NY Zip Code 14625</p> <p>Purpose of Disbursement Workman's Compensation Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D358738</p> <p>Date of Disbursement <div> <div>12</div> <div>20</div> <div>2010</div> </div> </p> <p>Amount of Each Disbursement this Period <div>13.16</div> </p>
<p>SUBTOTAL of Disbursements This Page (optional) ► <div>1116.65</div></p>	
<p>TOTAL This Period (last page this line number only) ► <div></div></p>	

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D358745 Date of Disbursement
Mailing Address 175 E Houston St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 1 / 2 0 1 0</div> </div>
City San Antonio State TX Zip Code 78205	Amount of Each Disbursement this Period
Purpose of Disbursement Mobile Service	<div>167.45</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) STEPHEN T HARTELL	Transaction ID: D358715 Date of Disbursement
Mailing Address 2702 Mosby St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 1 0</div> </div>
City Alexandria State VA Zip Code 22305-1825	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Baseball Tickets	<div>1040.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Boston Red Sox	Transaction ID: D358716 Date of Disbursement
Mailing Address 4 Yawkey Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 1 0</div> </div>
City Boston State MA Zip Code 02215-3409	Amount of Each Disbursement this Period
Purpose of Disbursement Baseball Tickets	<div>1040.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1207.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270	Transaction ID: D358726 Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div>
City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>2327.15</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Google Adwords Mailing Address PO Box 39000 City San Francisco State CA Zip Code 94139 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D358727 Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>2327.15</div> <div>Category/Type</div> <p>[MEMO ITEM]</p>
C. Full Name (Last, First, Middle Initial) Donald Brownlee Mailing Address 2630 S. Veitch St #309 City Arlington State VA Zip Code 22206 Purpose of Disbursement Expense Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D358750 Date of Disbursement <div> <div>12</div> <div>02</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>602.97</div> <div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

2930.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Paisanos Pizza	Transaction ID: D358765 Date of Disbursement
Mailing Address 10535 Main St	<div> <div>12</div> <div>02</div> <div>2010</div> </div>
City State Zip Code Fairfax City VA 22205	Amount of Each Disbursement this Period
Purpose of Disbursement Volunteer Food	<div>32.03</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Donald Brownlee	Transaction ID: D358762 Date of Disbursement
Mailing Address 2630 S. Veitch St #309	<div> <div>12</div> <div>02</div> <div>2010</div> </div>
City State Zip Code Arlington VA 22206	Amount of Each Disbursement this Period
Purpose of Disbursement Mileage Reimbursement	<div>147.86</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: D358763 Date of Disbursement
Mailing Address 1100 Wythe St	<div> <div>12</div> <div>02</div> <div>2010</div> </div>
City State Zip Code Alexandria VA 22314	Amount of Each Disbursement this Period
Purpose of Disbursement Postage	<div>391.60</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D358772 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0
Mailing Address 175 E Houston St		Amount of Each Disbursement this Period
City San Antonio State TX Zip Code 78205		31.48
Purpose of Disbursement Office Equipment Purchase		Category/ Type
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼		
B.	Full Name (Last, First, Middle Initial) Donald Brownlee	Transaction ID: D358751 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
Mailing Address 2630 S. Veitch St #309		Amount of Each Disbursement this Period
City Arlington State VA Zip Code 22206		260.89
Purpose of Disbursement Expense Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Paisanos Pizza	Transaction ID: D358766 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0
Mailing Address 10535 Main St		Amount of Each Disbursement this Period
City Fairfax City State VA Zip Code 22205		40.00
Purpose of Disbursement Volunteer Food		Category/ Type
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

260.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Chef Geoff's	Transaction ID: D358770 Date of Disbursement
Mailing Address 8045 Leesburg Pike	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period
Purpose of Disbursement Catering	<div>160.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Staples	Transaction ID: D358767 Date of Disbursement
Mailing Address 9230 Old Keene Mill	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Burke State VA Zip Code 22015	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies	<div>60.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Elizabeth A. Nathanson	Transaction ID: D358752 Date of Disbursement
Mailing Address 15104 Championship Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City Haymarket State VA Zip Code 20169	Amount of Each Disbursement this Period
Purpose of Disbursement Expense Reimbursement	<div>203.68</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

SUBTOTAL of Disbursements This Page (optional)

203.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Staples	Transaction ID: D358768 Date of Disbursement
Mailing Address 9230 Old Keene Mill	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 1 0</div> </div>
City State Zip Code Burke VA 22015	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies	<div>203.68</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<p>[MEMO ITEM]</p>	
B. Full Name (Last, First, Middle Initial) Elizabeth A. Nathanson	Transaction ID: D358754 Date of Disbursement
Mailing Address 15104 Championship Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Haymarket VA 20169	Amount of Each Disbursement this Period
Purpose of Disbursement Expense Reimbursement	<div>299.29</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Staples	Transaction ID: D358771 Date of Disbursement
Mailing Address 9230 Old Keene Mill	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 2 / 2 0 1 0</div> </div>
City State Zip Code Burke VA 22015	Amount of Each Disbursement this Period
Purpose of Disbursement Office Supplies	<div>299.29</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<p>[MEMO ITEM]</p>	
SUBTOTAL of Disbursements This Page (optional)	<div>299.29</div>
TOTAL This Period (last page this line number only)	<div>22030.32</div>

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Mr. Theodore N. Lerner	Transaction ID: D382911 Date of Disbursement																				
Mailing Address 11501 Huff Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	1	0												
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period																				
Purpose of Disbursement Adjustment to CTD Totals	<table border="1"> <tr> <td>-2400.00</td> </tr> </table>	-2400.00																			
-2400.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) Mr. Theodore N. Lerner	Transaction ID: D382912 Date of Disbursement																				
Mailing Address 11501 Huff Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	1	0												
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period																				
Purpose of Disbursement Adjustment to CTD Totals	<table border="1"> <tr> <td>-350.00</td> </tr> </table>	-350.00																			
-350.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Mr. Theodore N. Lerner	Transaction ID: D358756 Date of Disbursement																				
Mailing Address 11501 Huff Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	6		2	0	1	0												
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td>2400.00</td> </tr> </table>	2400.00																			
2400.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A. Full Name (Last, First, Middle Initial) Mr. Theodore N. Lerner	Transaction ID: D358757 Date of Disbursement
Mailing Address 11501 Huff Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </div>
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund	<div>350.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mr. Mark D. Lerner	Transaction ID: D358758 Date of Disbursement
Mailing Address 11501 Huff Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </div>
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund	<div>2400.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Mark D. Lerner	Transaction ID: D358759 Date of Disbursement
Mailing Address 11501 Huff Court	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 1 0</div> </div>
City North Bethesda State MD Zip Code 20895	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund	<div>350.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Connolly for Congress

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Tanenbaum

Mailing Address 11501 Huff Court

City North Bethesda State MD Zip Code 20895

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358761

Date of Disbursement

12 / 16 / 2010

Amount of Each Disbursement this Period

1750.00

B.

Full Name (Last, First, Middle Initial)

Mr. Edward L. Cohen

Mailing Address 11501 Huff Court

City North Bethesda State MD Zip Code 20895

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D358760

Date of Disbursement

12 / 16 / 2010

Amount of Each Disbursement this Period

1750.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

9000.00